ſ	SERIAL NUMBER	FIL	ING DATE	CLASS	GROUP ART	UNIT	ATTORNEY DOC	KET NO.
	09/027,670	02	23/98	600	3736	}	5051-418	
	JIM E. RIVIE BAYNES, CARY					NC; RON	NALD E.	
	CONTINUING VERIFIED **371 (NAT'L	•		****				
	VERIFIED							
	FOREIGN AP VERIFIED	PLICATIONS	*****	-				
	WADDIAN BIT	NO ITOMNOM O	NORMOND OA/	11 /00	**** SMAT.	r mainta	7 .	
- 1	FOREIGN FILI Foreign Priority claimed 35 USC 119 (a-d) cond Verified and Acknowled	l ☐yes litions met ☐yes	□no □no □Met after	Allowance STAT	E OR SHEETS		TOTAL CLAIMS 50	INDEPENDENT CLAIMS 3
1	SEE CUSTOME SEE CUSTOME SEE CUSTOME	R NUMBER: 02	20792	•				
\$	METHODS, SY INTERVALS	STEMS AND PF	RODUCTS FOR	DETERMINING	DRUG WITHD	RAWAL		
	FILING FEE RECEIVED \$790	DUNT 1	All Fees 1.16 Fees (Filing) 1.17 Fees (Processing Ext. of time) 1.18 Fees (Issue) Other Credit					

SERIAL NUMBER	1	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DO	CKET NO.
09/027	,670	02/23/98	600	3736	5051-418	
JIM E. RI BAYNES, C	VIERE, RALE CARY, NC; AR	EIGH, NC; TOMA RTHUR L. CRAIG	S MARTIN-JIMEI	NEZ, CARY, NC; I	RONALD E.	
CONTINU VERIFIED		C DATA***	*****			
m	-					
371 (NA VERIFIED		DATA*****	*****			
	•					
FOREIGN	APPLICATION	NS******				
FOREIGN VERIFIED		NS******	•			
		NS**********	·			
		NS*********	•			
		NS*********	•			
		NS*********				
		NS*********				
		NS*********				
VERIFIED						
VERIFIED IF REQUIRE	ED, FOREIGN			21/98 ** SMALL	ENTITY **	
VERIFIED IF REQUIRE	ED, FOREIGN	FILING LICENS	SE GRANTED 04/	OR SHEETS	TOTAL	INDEPENDE
IF REQUIRED oreign Priority clai 5 USC 119 (a-d) (ED, FOREIGN med Conditions met	FILING LICENS yes gro	SE GRANTED 04/	OR SHEETS TRY DRAWING	TOTAL CLAIMS	CLAIMS
IF REQUIRED oreign Priority clai 5 USC 119 (a-d) (ED, FOREIGN med Conditions met	FILING LICENS Yes To Met afte	SE GRANTED 04/	OR SHEETS	TOTAL	INDEPENDE CLAIMS 3
VERIFIED IF REQUIRE oreign Priority clai 5 USC 119 (a-d) of the control of the	ED, FOREIGN med Conditions met Conditions met	FILING LICENS yes Too Met after NAN SInitials Init	SE GRÂNTED 04/ er Allowance COUNT	OR SHEETS TRY DRAWING	TOTAL CLAIMS	CLAIMS
VERIFIED VERIFIED VERIFIED Oreign Priority clai USC 119 (a-d) of the control o	ED, FOREIGN med Conditions met Cond	FILING LICENS yes Too Met after NAN SInitials Init	SE GRÂNTED 04/ er Allowance COUNT	OR SHEETS TRY DRAWING	TOTAL CLAIMS	CLAIMS
VERIFIED IF REQUIRE oreign Priority clai 5 USC 119 (a-d) of the control of the	ED, FOREIGN med Conditions met Cond	FILING LICENS yes Too Met after NAN SInitials Init	SE GRÂNTED 04/ er Allowance COUNT	OR SHEETS TRY DRAWING	TOTAL CLAIMS	CLAIMS
VERIFIED IF REQUIRE oreign Priority clai 5 USC 119 (a-d) of the control of the	ED, FOREIGN med Conditions met Cond	FILING LICENS yes Too Met after NAN SInitials Init	SE GRÂNTED 04/ er Allowance COUNT	OR SHEETS TRY DRAWING	TOTAL CLAIMS	CLAIMS
VERIFIED VERIFIED VERIFIED Oreign Priority clai USC 119 (a-d) of the control o	ED, FOREIGN med Conditions met Cond	FILING LICENS yes Too Met after NAN SInitials Init	SE GRÂNTED 04/ er Allowance COUNT	OR SHEETS TRY DRAWING	TOTAL CLAIMS	CLAIMS
IF REQUIRED oreign Priority claid 5 USC 119 (a-d) (a-	ED, FOREIGN med Conditions met Cond	FILING LICENS yes To Met after NN SINITIALS 020792	SE GRANTED 04/ or Allowance COUNT NC	OR SHEETS DRAWING 10	TOTAL CLAIMS	CLAIMS
VERIFIED IF REQUIRED oreign Priority claid 5 USC 119 (a-d) of the description of the de	ED, FOREIGN med Conditions met Cond	FILING LICENS yes To Met after NN SINITIALS 020792	SE GRANTED 04/ or Allowance COUNT NC	OR SHEETS TRY DRAWING	TOTAL CLAIMS	CLAIMS
VERIFIED IF REQUIRED oreign Priority claid 5 USC 119 (a-d) of the desired and Acknowledge Custon SEE Custon METHODS,	ED, FOREIGN med Conditions met Cond	FILING LICENS yes To Met after NN SINITIALS 020792	SE GRANTED 04/ or Allowance COUNT NC	OR SHEETS DRAWING 10	TOTAL CLAIMS	CLAIMS
VERIFIED IF REQUIRED oreign Priority claid 5 USC 119 (a-d) of the description of the de	ED, FOREIGN med Conditions met Cond	FILING LICENS yes To Met after NN SINITIALS 020792	SE GRANTED 04/ or Allowance COUNT NC	OR SHEETS DRAWING 10	TOTAL CLAIMS	CLAIMS
IF REQUIRED Oreign Priority clair 5 USC 119 (a-d) (a	ED, FOREIGN med Conditions met Cond	FILING LICENS yes To Met after NN SINITIALS 020792	SE GRANTED 04/ or Allowance COUNT NC	OR SHEETS DRAWING 10	TOTAL CLAIMS	CLAIMS
IF REQUIRED Oreign Priority clair 5 USC 119 (a-d) (a	ED, FOREIGN med Conditions met Cond	FILING LICENS yes yo Met after www. www.	SE GRANTED 04/ Or Allowance STATE COUNT NC IAIS	OR SHEETS DRAWING 10	TOTAL CLAIMS 50	CLAIMS
IF REQUIRED Oreign Priority clair 5 USC 119 (a-d) (a	ED, FOREIGN med conditions met wiedged Examiner DMER NUMBER: SYSTEMS AND	FILING LICENS yes gro Met after www. sinitials nit 2020792 PRODUCTS FOR ority has been given	SE GRANTED 04/ Pr Allowance COUNT NC Lais DETERMINING I	OR SHEETS DRAWING 10 DRUG WITHDRAWAL All Fees	TOTAL CLAIMS 50	CLAIMS
IF REQUIRED oreign Priority clair 5 USC 119 (a-d) (a-	ED, FOREIGN med conditions met wiedged Examiner OMER NUMBER: SYSTEMS AND FEES: Authore	FILING LICENS yes yes no Met after www.	SE GRANTED 04/ Per Allowance COUNT NC TAIS DETERMINING I	OR SHEETS DRAWING 10 PRUG WITHDRAWAL All Fees 1.16 Fee 1.17 Fees	TOTAL CLAIMS 50 es (Filing) es (Processing Ex	3
IF REQUIRED Oreign Priority clair 5 USC 119 (a-d) (a	ED, FOREIGN med conditions met wiedged Examiner DMER NUMBER: SYSTEMS AND	FILING LICENS yes yes no Met after www.	SE GRANTED 04/ Pr Allowance COUNT NC Lais DETERMINING I	OR SHEETS DRAWING 10 PRUG WITHDRAWAL All Fees 1.16 Fe 1.17 Fe 1.18 Fe	TOTAL CLAIMS 50 es (Filing)	CLAIMS 3
IF REQUIRED oreign Priority clair 5 USC 119 (a-d) (a-	ED, FOREIGN med conditions met wiedged Examiner OMER NUMBER: SYSTEMS AND FEES: Authore	FILING LICENS yes yes no Met after www.	SE GRANTED 04/ Per Allowance COUNT NC TAIS DETERMINING I	OR SHEETS DRAWING 10 PRUG WITHDRAWAL All Fees 1.16 Fee 1.17 Fees	TOTAL CLAIMS 50 es (Filing) es (Processing Ex	3

the same of the sa